



Change of Business Name/DBA for Occupational Tax Certificate

*****If ownership of business has changed, a new application must be submitted*****

Current Business Name: _____ Account No.: _____

Business Owner/Applicant: _____

Business Address: _____ Ste/Apt: _____

City, State, Zip Code: _____ Business Phone: _____

New Business/DBA Name: _____

Brief Description of business activity: _____

If new certificate is needed, please include \$5.00 reprint fee made payable to the City of Sandy Springs

By signing below, I hereby certify, under penalty of perjury, that statements made herein are to the best of my knowledge true and correct.

Signature of Applicant

Date

Print Name of Applicant

Title